SEC 1972 (6-02)

1341745

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

PROCESSED

OCT 2 1 2005

THOMSON FINANCIAL NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
ORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076

Expires: April 30, 2008

Estimated average burden hours per response... 1

SEC USE ONLY							
Prefix		Serial					
DAT	E RECEI	VED					

Name of Offering ([] check Offer and sale of preferred s			as changed, and	indicate change	···)	
Filing Under (Check box(es	) that apply):	[ ] <u>Rule 504</u>	[ ] Rule 505	[X] Rule 506	5 [ ] Section 4(6)	[ ] ULOE
Type of Filing: [X] New Fili	ng [ ] Amendm	ent				
		A. B.	SIC IDENTIFICA	ATION DATA		
1. Enter the information req	uested about the is	ssuer				
Name of Issuer ([ ] check in Boston Private Capital Trus		nent and name ha	s changed, and i	ndicate change.	.)	05068049
Address of Executive Office 160 Bovet Road San Mateo			Zip Code) Telep	hone Number (I	Including Area Code)	
Address of Principal Busine Executive Offices) 160 Bovet Road San Mateo	, ,	·	City, State, Zip C	ode) Telephone	e Number (Including A	Area Code) (if different from
issuer, (b) to invest the gros	functions of the is s proceeds from s engage in only tho	uch sale in debent se other activities	tures and (c) exce	ept as otherwise	imited in the Amend	al interests in the assets of the ded and Restated Declaration of r its institutional trustee, including,
Type of Business Organizat	ion					
[ ] corporation [ ] business trust		d partnership, alre d partnership, to b	•	[X] other (	please specify): state	utory trust
Actual or Estimated Date of	Incorporation or C	)rganization	Mon 09	th Year 2005	[X]Actual []E	stimated
Jurisdiction of Incorporation	or Organization: (	•	S. Postal Service	abbreviation fo		

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

	BASIC	IDENT	IEICA	TION	DATA
A	BASIL	II)ENI	IFICA	HUN	DAIA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

			***************			
Check Box(es) that Apply:	[X] Promoter [ ]	Beneficial Owner	[ ] Executive Off	icer [] Direc	ctor [X] Sponsor	
Full Name (Last name first, i Boston Private Financial Hol						
Business or Residence Addr Ten Post Office Square, Bos		City, State, Zip Code	)			
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[ ] Executive Offi	cer [] Direct	tor [X] Trustee	
Full Name (Last name first, i Wilmington Trust Company	f individual)					
Business or Residence Addr Rodney Square North, 1100						
Check Box(es) that Apply:	[] Promoter [] Bene	ficial Owner [X]	Executive Officer	[X] Director []	General and/or Managing Partner	
Full Name (Last name first, i Emanuela Allgood	f individual)					
Business or Residence Addr 160 Bovet Road San Mateo,		City, State, Zip Code	)			
Check Box(es) that Apply:	[] Promoter [] Bene	eficial Owner [X]	Executive Officer		General and/or Managing Partner	
Full Name (Last name first, i Carissa Barber	f individual)					, part
Business or Residence Addr 160 Bovet Road San Mateo,		City, State, Zip Code	)			
Check Box(es) that Apply:	[ ] Promoter [ ] Bene	eficial Owner [X] E	Executive Officer [	X ] Director [ ]	General and/or Managing Partner	
Full Name (Last name first, i Jonathan H. Parker	f individual)					
Business or Residence Addition 160 Bovet Road San Mateo,	•	City, State, Zip Code	)			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

						B. INFORM	AATION A	BOUT OFF	ERING				
1. Has	the issuer	r sold, or d	loes the is	suer inten	d to sell, to	non-accr	edited inve	stors in this	s offering?.		Y [	es No	
					•			iling under					
2. Wha	it is the mi	inimum inv	estment t	hat will be	accepted	from any ii	ndividual?.		••••		- 1	N/A	
3. Doe	s the offer	ing permit	joint own	ership of a	single uni	t?						es No ] [X]	
commi If a per state o	ssion or si son to be r states, li	imilar remi listed is ai st the nam	uneration in associatine of the b	for solicita ed person roker or de	tion of pure or agent of ealer. If mo	chasers in of a broker ore than fiv	connection or dealer re e (5) perso	id or given n with sales registered v ons to be lis dealer only	of securition of securities of	es in the of C and/or w	ffering. ith a N	1/A	
Full Na	ime (Last	name first	, if individu	ual)									
Busine	ss or Resi	idence Ad	dress (Nu	mber and	Street, City	y, State, Zi	p Code)						
Name	of Associa	ited Broke	r or Deale	٢	***************************************				***************************************				
					Intends to	Solicit Pu 	rchasers			[	] All Stat	es	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[Al]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[\forall T]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Na	me (Last	name first	, if individu	ıal)									•
Busine	ss or Resi	idence Ad	dress (Nu	mber and	Street, City	y, State, Zi	p Code)		<u> </u>				********
Name	of Associa	ited Broke	r or Deale	r	······································		······································						
					Intends to	Solicit Pu	rchasers			ſ	] All Stat	es	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[N]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
IRII	(SC)	[SD]	[TN]	ΠXI	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	IWY1	(PR)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security  Debt  Equity	Aggregate Offering Price \$ 0 \$ 100,000,000	Amount Already Sold \$ 0 \$ 100,000,000
Convertible Securities (including warrants)  Partnership Interests  Other (Specify).  Total  Answer also in Appendix, Column 3, if filing under ULOE.	\$0 \$0 \$0 \$_100,000,000	\$ 0 \$ 0 \$ 0 \$ 100,000,000
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
Accredited Investors	Number Investors 5 0 5	Aggregate Dollar Amount of Purchases \$ 100,000,000 \$ 0 \$ 100,000,000
3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	N/A	
Type of offering Rule 505	Type of Security	Dollar Amount Sold \$_ \$_ \$_ \$_ \$_
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs  Legal Fees  Accounting Fees  Engineering Fees  Sales Commissions (specify finders' fees separately)  Other Expenses (identify) _(Portal fees)  Total	[]\$ []\$ []\$	42,500

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$\_99,930,500

Payments to

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

Salaries and fees	Officers, Directors, & Affiliates	Payments To Others
Purchase of real estate	[]\$	[]\$
Purchase, rental or leasing and installation of machinery	(14	
and equipment	[]\$	[]\$
Construction or leasing of plant buildings and facilities	[]\$	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$	[]\$
Repayment of indebtedness	[]\$	[]\$
Working capital	[]\$	[]\$
Other (specify): Investment in debt securities	[]\$	[]\$99,930,500
Column Totals	[]\$	[]\$99,930,500
Total Payments Listed (column totals added)	1	] \$99,930,500

n	EED	ED	Δı	SIGI	NAT	URE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)  Boston Private Capital Trust II	Signature  August Surpell 10/5/05
	Title of Signer (Frint or Type)  Administrator

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE		
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes No	
See Appendix, Column 5, for state response.	( ) ( )	

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date 1
Boston Private Capital Trust II	( Arus Harby) 195/05
Name of Signer (Print or Type)	Title (Print of Type)
	Administrator

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1		2	1			4		1	5	
' '	·	-	3							
		l to sell				Disqua	lification			
		non- edited	Type of security and aggregate					under State ULOE (if yes, attach		
		tors in	offering price		Type of	investor and		explan	ation of	
	St	ate	offered in state		amount pur	chased in State	е	waiver	granted)	
	(Part B	-Item 1)	(Part C-Item 1)		(Part	C-Item 2)		(Part E	-Item 1)	
				Ni. mahawaé		Number of				
				Number of Accredited		Non- Accredited				
State	Yes	No	Preferred Stock	Investors	Amount	Investors	Amount	Yes	No	
AL										
AK					· · · · · · · · · · · · · · · · · · ·					
AZ									-	
AR										
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http://www.sec.gov/divisions/corpfin/forms/formd.htm Last update: 06/06/2002